



University of Massachusetts
325 Whitmore Administration Building
181 President's Drive
Amherst, MA 01003-9313

Division of Human Resources

October 1, 2014

Dear USA/MTA Union Member:

RE: USA/MTA/NEA Sick Leave Bank Annual Open Enrollment

Article 10 of the Agreement between the Board of Trustees of the University of Massachusetts and the University Staff Association (affiliate of the Massachusetts Teachers Association/NEA) describes the Sick Leave Bank available to USA/MTA/NEA employees. Article 10 is included in this mailing.

The Sick Leave Bank was created to provide paid leave to Sick Leave Bank members who:

- ◆ are out of work recovering from a short-term, non-work-related illness or injury
- ◆ do not have enough accrued sick, personal, compensatory and vacation time to provide continued compensation during recovery
- ◆ have a reasonable expectation of returning to consistently perform the job from which they became disabled
- ◆ are not receiving or eligible for income replacement from another source

During the annual open enrollment period, individuals may elect to enroll in or donate additional sick days to the Sick Leave Bank.

Following is a USA/MTA Sick Leave Bank Open Enrollment Form. Completed forms must be returned to the Division of Human Resources Employee Service Center for receipt no later than **5:00 p.m. on Friday, October 31, 2014**. Additional forms are available at the Division of Human Resources Employee Service Center, 325 Whitmore Administration Building.

Questions concerning the Sick Leave Bank may be referred to the USA/MTA/NEA Office (545-0165) or to Leslie Moes (545-6108) in Human Resources.

Sincerely,

The USA/MTA/NEA
Sick Leave Bank Committee

**University Staff Association
Affiliate of the Massachusetts Teachers Association/NEA
Agreement with the University of Massachusetts Amherst Board of Trustees**

ARTICLE 10 - SICK LEAVE BANK

STATEMENT OF PURPOSE ~ The Sick Leave Bank (hereinafter referred to as the SLB) is intended to be used for short-term and non-work related disabilities, where the employee has a reasonable expectation of returning to consistently perform the job from which he/she became disabled. It is not intended as a substitute for, supplement to, other income sources (e.g. long-term disability).

ESTABLISHMENT ~ Upon the execution of this Agreement, every new member of the bargaining unit shall be members of the Sick Leave Bank upon the commencement of their employment. Benefits under this Article shall be pro-rated for part-time employees. New bargaining unit members shall not be able to access the USA Sick Leave Bank until they have completed the probationary period in Article 17A, § 1.

OPEN ENROLLMENT ~ Unit members who did not join the SLB prior to execution of this Agreement, may join the SLB during Open Enrollment. Open Enrollment is held during the month of October. During an open enrollment period, a unit member has the right to:

JOIN: become a member by assigning one (1) or more full days of his/her sick leave accumulation to the Bank, provided however, that on the date of making such assignment the employee must have at least three (3) days of sick leave. No one shall be able to access the Sick Leave Bank until ninety (90) days after enrolling.

MAINTAIN MEMBERSHIP ~ Sick Leave Bank members must donate one (1) full sick day each year which shall be deducted at the rate of 1/26th of a day per pay period for each of the twenty-six (26) pay periods.

APPLICATION ~ The Sick Leave Bank shall be administered by a joint labor-management committee with equal representation between unit members and the administration. A Sick Leave Bank member may apply to draw from the Bank by submitting a completed Sick Leave Bank Application, signed by a physician, stating the nature of the employee's illness or disability and its anticipated duration.

If a majority vote by the Sick Leave Bank Committee approves an application, a member may draw upon the Bank five (5) working days after the exhaustion of the member's sick leave, personal leave, any compensatory time accumulation, and all but ten (10) days of accrued vacation leave. The Sick Leave Bank Committee shall determine the period of time the member may draw from the Bank. After an employee has drawn from the Bank for the approved period of time, not to exceed ninety (90) days, his/her case shall be reviewed by the Sick Leave Bank Committee upon reapplication by the employee. The Sick Leave Bank Committee may, by majority affirmative vote, authorize the employee to continue drawing from the Bank. Any employee drawing on the Sick Leave Bank may at any time be disqualified from continuing to draw on the Bank by majority vote of the Sick Leave Bank Committee.

Any vacation leave, sick leave, and personal leave, which accrues to an employee during a period in which he/she is drawing on the Sick Leave Bank, shall be credited to the Bank.

Employees retiring from the University shall be permitted to contribute any remaining days of sick leave to the Sick Leave Bank at his/her date of retirement before any payment for unused sick leave is processed.

**UNIVERSITY STAFF ASSOCIATION AFFILIATE OF THE MTA/NEA
SICK LEAVE BANK OPEN ENROLLMENT FORM**

According to the Agreement between the Board of Trustees of the University of Massachusetts and the University Staff Association (affiliate of the Massachusetts Teachers Association/NEA) describes the Sick Leave Bank available to USA/MTA/NEA employees.

Questions concerning the Sick Leave Bank may be referred to the USA/MTA/NEA Office (545-0165) or to Leslie Moes (545-6108) in Human Resources.

Complete this form ONLY if you choose to *enroll in OR **donate additional days to the Bank.

NAME :

EMPLOYEE ID, RCD :

STD HRS

SICK LEAVE BANK MEMBERSHIP STATUS :

Non-Member

***ENROLL ~ (For NON-members of the USA/MTA/NEA Sick Leave Bank)**

I wish to voluntarily participate in the USA/MTA/NEA Employee Sick Leave Bank. I authorize the Division of Human Resources to assign one (1) or more of my sick leave days to said Sick Leave Bank. I understand that I must have at least three (3) days of sick leave in order to become a member of the Bank, and that 1/26th of a day per pay period will be automatically deducted from my sick accruals, and the effective date of my membership will be 11/2/14.

Number of days to be assigned _____ (if blank, 1 day of sick leave will be assigned)

The day(s) you have assigned to the Sick Leave Bank will be deducted directly from your sick leave balance.

SIGNATURE _____ DATE _____

****DONATE ~ (For current members of the USA/MTA/NEA Sick Leave Bank)**

According to the current bargaining contract, in order to maintain membership in the Sick Leave Bank, "members must donate one (1) full sick day each year, which shall be deducted at the rate of 1/26th of a day per pay period for each of the twenty-six (26) pay periods." This donation is occurring automatically. However, Sick Leave Bank members may voluntarily elect to donate additional days to the Bank.

_____ I voluntarily elect to donate _____ additional sick leave days to the Sick Leave Bank.
(# of days)

SIGNATURE _____ DATE _____

Please make a copy of your completed form for your records and forward the original to:

Leslie Moes
Division of Human Resources
University of Massachusetts
325 Whitmore Administration Building
Amherst, MA 01003

For receipt by: **5:00 p.m. on Friday, October 31, 2014**

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For Human Resources Use Only

Date Processed by HR Admin: _____

Amount to be Deducted from Sick Leave Balance: - _____ Hrs Sick balance upon OE: _____ hrs

Pay Period Adjustment Was Made: _____ Eff. Date: 11/2/14

Date Processed by Payroll: _____ (donation only)